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Fill in this information to identify your case:								
Debtor 1	Michelle		May					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankru	ptcy Court for the:	Eastern District of Pennsylvania						
Case number (if known)								

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
☑ 3. The commitment period is 3 years.						
4. The commitment period is 5 years.						
☐ Check if this is an amended filing						

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: Calculate Your Average Monthly Income							
1.	1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married. Fill out both Columns A and B, lines 2-11.							
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.								
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
 Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 					\$0.00			
3.	3. Alimony and maintenance payments. Do not include payments from a spouse.				\$0.00			
4.	All amounts from any source which are regularly paid for your dependents, including child support. Include regular unmarried partner, members of your household, your deperonments. Do not include payments from a spouse. Do not line 3.	or	\$0.00					
5.	Net income from operating a business, profession, or							
	farm	Debtor 1 \$0.00	Debtor 2 \$0.00					
	Gross receipts (before all deductions)	\$0.00 -	\$0.00					
	Ordinary and necessary operating expenses	\$0.00		Conv				
	Net monthly income from a business, profession, or farm		\$0.00	Copy here –	\$0.00			
6.	Net income from rental and other real property	Debtor 1	Debtor 2					
	Gross receipts (before all deductions)	\$0.00	\$0.00					
	Ordinary and necessary operating expenses	\$0.00	\$0.00					
	Net monthly income from rental or other real property	\$0.00	70.00	Copy	\$0.00			

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Debto	r 1	Michelle		May			Case num	ber (if known)	
		First Name	Middle Name	Last Name					
						Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
7. In	terest, divid	lends, and royal	ies				\$0.00		
8. U i	nemployme	nt compensation	1				\$0.00		_
D	o not enter t	he amount if you	contend that the amo	ount received was	a benefit under		<u> </u>		<u> </u>
th	e Social Se	curity Act. Instead	d, list it here:						
	For you				\$2,332.50				
	For your s	spouse							
ur in St de ur ex	nder the Soc clude any co tates Govern eath of a me nder chapter kceed the ar	cial Security Act. compensation, per comment in connect comber of the unifor for 61 of title 10, the count of retired p	Do not include any a Also, except as stated asion, pay, annuity, or ion with a disability, co ormed services. If you en include that pay on ay to which you would other than chapter 61	I in the next senter allowance paid by ombat-related injur received any retire ly to the extent that d otherwise be ent	nce, do not the United y or disability, or ed pay paid at it does not		<u>\$0.00</u>		_
r a t	not include a a victim of a errorism; or States Gove death of a m	iny benefits recei war crime, a crim compensation, p rnment in connec	es not listed above. So ved under the Social so the against humanity, considering the against humanity, considering the adaptive and the social social services. If new all below.	Security Act; paym or international or co or allowance paid I combat-related inju	ents received as lomestic by the United ary or disability, or				
_									_
_									_
To	otal amounts	from separate p	ages, if any.			+		+	
			monthly income. Add r Column A to the tota		O for each	\$	0.00	+	Total average monthly income
Part	2: Detern	nine How to M	leasure Your Dedu	uctions from In	come				•
12 (Copy your to	otal average mor	nthly income from line	a 11					\$0.00
		J	•	• • • • • • • • • • • • • • • • • • • •		•••••			\$0.00
_		•	nent. Check one:						
		married. Fill in 0							
_			ouse is filing with you						
			ouse is not filing with	•					
		dents, such as pa	me listed in line 11, Constitution in the spouse's ment of the spouse's spouse's spouse's spouse's spouse's spouse's spouse's spouse.						
		cify the basis for diustments on a	excluding this income separate page.	and the amount of	f income devoted to	o each purpose.	If necessa	ary, list	
	If this adjust	tment does not a	pply, enter 0 below.						
					+-				
	Total					\$0.00	Convi	nere. $ ightarrow$	- \$0.00
					_	<u> </u>	_ сору і	1016. <i>/</i>	
14. \	Your current	monthly incom	e. Subtract the total in	line 13 from line 1	2.				\$0.00

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Debtor 1	Michelle	r	May	Case number (if known)	
	First Name	Middle Name L	ast Name	. ,	
15. Calculate	e your current month	hly income for the year. Follo	w these steps:		
15a. Co	py line 14 here \longrightarrow				\$0.00
Mul	tiply line 15a by 12 (t	the number of months in a ye	ar).		x 12
15b. Th	e result is your currer	nt monthly income for the yea	ar for this part of the forr	n	\$0.00
16. Calculate	e the median family i	income that applies to you.	Follow these steps:		
	in the state in which		Pennsyl	vania	
16b. Fill	in the number of peo	ople in your household.	3		
16c Fill	in the median family	income for your state and si	ze of household		\$100,881.00
To f	ind a list of applicable	e median income amounts, g . This list may also be availab	o online using the link s	pecified in the separate	
17. How do 1	the lines compare?				
		an or equal to line 16c. On th	e top of page 1 of this fo	orm, check box 1, Disposable income is not deterr	mined under 11
_	U.S.C. § 1325(b)(3	3). Go to Part 3. Do NOT fill o	out Calculation of Your L	Disposable Income (Official Form 122C-2).	
17b. ┕	1325(b)(3). Go to			c box 2, Disposable income is determined under 1 acome (Official Form 122C–2). On line 39 of that form	
Part 3: Cal	culate Your Comr	mitment Period Under 1	1 U.S.C. §1325(b)(4)	
18. Copy yo	ur total average mon	nthly income from line 11			\$0.00
calculatin				filing with you, and you contend that uct part of your spouse's income, copy the	
19a. If the	marital adjustment of	does not apply, fill in 0 on line	19a		- \$0.00
19b. Subt	ract line 19a from lin	ne 18.			\$0.00
20. Calculate	e your current month	hly income for the year. Follo	ow these steps.		
20a Conv	line 19h				\$0.00
		r of months in a year).			x 12
	., ., (
20b. The re	esult is your current n	nonthly income for the year for	or this part of the form.		\$0.00
20c. Copy	the median family inc	come for your state and size	of household from line 1	6c	<u>\$100,881.00</u>
21. How do t	the lines compare?				
☑ Line 20	0b is less than line 20	Oc. Unless otherwise ordered 3 years. Go to Part 4.	by the court, on the top	of page 1 of this form, check box 3,	
Line 20	b is more than or eq	•		rt, on the top of page 1 of this form,	
Part 4: Sign	n Below				
By signing	here, under penalty	of perjury I declare that the i	nformation on this state	ment and in any attachments is true and correct.	
X /s	s/ Michelle May				
Siç	gnature of Debtor 1		<u> </u>		
Da	ate 11/18/2024 MM/ DD/ YYYY				
-		I out or file Form 122C-2.	farms On Page 60 At 1	fam.	4.4 abauc
It you che	cked 17b, fill out Forr	m 122C-2 and file it with this	torm. On line 39 of that	form, copy your current monthly income from line	14 above.